

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **130.00****Complete if Known**Application Number **10/627,591**Filing Date **July 25, 2003**First Named Inventor **Andrew Clark**Examiner Name **Patel, Mital B.**Art Unit **3743**Attorney Docket No. **0029.10****RECEIVED****CENTRAL FAX CENTER****FEB 08 2006****METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|-----------------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |
| Total Claims | | |
| - 20 or HP = | x | = |
| HP = highest number of total claims paid for, if greater than 20. | | |
| Indep. Claims | | |
| - 3 or HP = | x | = |
| HP = highest number of independent claims paid for, if greater than 3. | | |
| Extra Claims | Fee (\$) | Fee Paid (\$) |
| | | |
| Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
| | | |

3. APPLICATION SIZE FEE

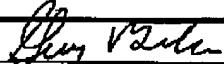
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
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| - 100 = | / 50 = | (round up to a whole number) x | 250.00 | = 0.00 |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge); Terminal Disclaimer Fee (extension fees authorized on separate sheet) **130.00****SUBMITTED BY**

| | | | | | |
|-------------------|---|-----------------------------------|------------------|-----------|--------------|
| Signature |  | Registration No. (Attorney/Agent) | 45,302 | Telephone | 650-620-5501 |
| Name (Print/Type) | Guy V. Tucker | Date | February 8, 2006 | | |

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TO: U.S. Patent and Trademark Office FROM: Guy V. Tucker

EXAMINER: Mital B. Patel PHONE NUMBER: 650.620.5501

FAX NUMBER: 571-273-8300 FAX NUMBER: 650.620.6395

PHONE NUMBER: DATE: February 8, 2006

RE: U.S. Serial No.: 10/627,591 TOTAL NO. OF PAGES INCLUDING COVER: 16
Docket No.: 0029.10

☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE
RECYCLE

DOCUMENTS SUBMITTED

Transmittal PTO/SB/21
Amendment
Extension of Time PTO/SB/22, in duplicate
Terminal Disclaimer
Fee Transmittal PTO/SB/17, in duplicate

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PTO/SB/21 (09-04)

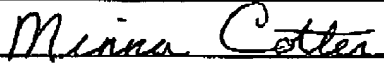
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| | | | |
|--|----------------------|------------------------|--|
| TRANSMITTAL FORM | Application Number | 10/627,591 | RECEIVED CENTRAL FAX CENTER FEB 08 2006 |
| | Filing Date | July 25, 2003 | |
| | First Named Inventor | Andrew Clark | |
| | Art Unit | 3743 | |
| | Examiner Name | Patel, Mital B. | |
| (to be used for all correspondence after initial filing) | | Attorney Docket Number | 0029.10 |
| Total Number of Pages in This Submission | | | |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Terminal Disclaimer and Facsimile Transmittal |
| Remarks | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | NEKTAR THERAPEUTICS | |
| Signature |  | |
| Printed name | Guy V. Tucker | |
| Date | 08 FEB 2006 | Reg. No. 45,302 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
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| Signature |  | | |
| Typed or printed name | Minna Cotter | Date | 02/08/2006 |

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